

G.N No. 490 (cont.)

PATENTS ACT, 1987
FORM NO. 2
(Regulation 8.52)

FOR OFFICIAL USE
Date of Receipt by
APPLICATION NO:

To: The Registrar of Patents
Ministry of Industries and Trade
P.O. Box 9393
DAR ES SALAAM -

(Office's Stamp)

FILLING DATE:

REQUEST FOR GRANT OF
PATENT OF UTILITY CERTIFICATE

Applicant's Agent's File Reference

THE APPLICANT(S)

REQUEST (S)

PATENT

UTILITY CERTIFICATE

THE GRANT OF

IN RESPECT OF THE FOLLOWING PARTICULARS:

I. TITLE OF INVENTION

II. **APPLICANT(S)** (The date a concerning each applicant must appear in this box or, if the space is insufficient, in the supplemental box). Additional information is contained in supplemental box.

Name:

Address:

Nationality:

Country of residence of principal place of business:

Telephone number:

Telegraphic Address

Telex Number

III. AGENT

The following agent has been appointed by the applicant(s) in the power of attorney.

accompanying this form

to be filed within one month
from the filing of this form.

Name:

(Form No. 2 first page)

Form No. 2 (contd)

Address:

Telephone number Telegraphic Address Telex Number

IV. INVENTO

The inventor is the Applicant

Additional information is contained in
supplemental box

If inventor is not the applicant

Name:

Address:

The sworn declaration under Section 18 (2) (b) including a statement
justifying the applicant's right accompanies this form.

V. DIVISION APPLICATION

This application is divisional application

The benefit of the filling fee Priority date of the initial

Application is claimed in as much as the subject matter of the present

Application is contained in the initial application identified below

Initial Application No:

Date of filing or priority date. If any of initial application:

VI. DISCLOSURES TO BE DISREGARDED FOR PRIOR ART PURPOSES

Disclosure occurred not more than six months before filling date or, where
priority is claimed, priority date of the present application by reason or in
consequence of:-

Acts performed by the applicant or his predecessor in title (including the
display of the invention at an officially, recognised intonation exhibition).

An evident abuse committed by a third party with regard to the rights of applicant or his predecessor in title.

Additional information is contained in a statement accompanying this Form.

(Form No. 2 second page)

VII. PRIORITY DECLARATION : (if any)

The priority of (and earlier application(s) is claimed as follows

The priority of more than one earlier application is claimed, the date are indicated in the supplemental box.

Country (if any earlier application is a regional or international application, indicate the office with which and the countries for which it was filed.

Filing Date:

application No.
will be furnished within
three months.

Symbol of the International Patent classification not yet allocated.

The certified copy of the earlier Application will be furnished Upon request by the Section 21 (2) and regulation 19 (4)

accompanying this Form Registrar, as prescribed by

VIII. SUPPLEMENTAL BOX

- Use this box if any of the boxes is not large enough to contain information to be furnished. Indicate the boxes continued in this box By their roman numerals and title (e.g. 11. APPLICANT(S) continued)”)

(Form No. 2 third page)

IX. CHECK LIST (TO BE FILLED IN BY THE APPLICANT)

<p>A. This application contained the following</p> <ol style="list-style-type: none"> 1. request.....shete(s) 2. description.....sheet(s) 3. claim(s).....sheet(s) 4. abstractsheet(s) 5. drawing(s)..... sheet(s) <p style="text-align: right;">Total</p>	<p>B. This Form, as filed, is accompanied the items ticked below</p> <p>separate signed power of attorney statement justifying the applicant's right statement that certain disclosure be disregarded.</p> <p>Priority documents (certified copy or earlier application(s))</p> <p>English translation of earlier application(s) on which priority declaration is based.</p> <p>application fee</p> <p>other documents(specify)</p>
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C. figure numberof the company (if any) is suggested to accompany the abstract for publication.

X. SIGNATURE(S).....DATE.....

-
- type name(s) under signature

TO BE FILLED IN BY THE REGISTRAR

1. Date of receipt of corrections or later filled documents completing the application:

2. Date fees received.
